Exhibit Name: Indemnity Calculation						
Exhibit Number: P22-2, Plan 50			**Reinsurance Year:** 2011			
Record Name: Inventory Value Claim			**Version:** DRAFT			
Record Code: P22			**Release Date:** 3/10/2011			

Insurance Plan Code	50 Dollar Amount of Insurance
Commodity Code	0073 Nursery

Calculations		**Field Name**	**Record Number**	**Field Number**	**Field Format**	**Field Rounding**	**Rules**
Section 1: Loss Guarantee Calculation							
When Coverage Type Code is NOT EQUAL "A" Catastrophic, "C" and Unit Division Code equal "T":		Unadjusted Loss Amount	Internal		S999999999	None	
Unadjusted Loss Amount = Field Market Value A - Field Market Value B		Field Market Value A	P22	24	999999999	None	
		Field Market Value B	P22	25	999999999	None	
Adjusted Loss Amount	= **When Over Under Reporting Factor Code EQUAL "U":** Unadjusted Loss Amount * Sum (Over Under Reporting Factor) by unit	Adjusted Loss Amount	P22	43	S999999999	Round to whole number	
	= **When Over Under Reporting Factor Code EQUAL "O":** Unadjusted Loss Amount * (1 - Over Under Reporting Factor)	Over Under Reporting Factor	P22	23	9.999	None	Sum of all Under Reporting Factor for the Unit
When Coverage Type Code is EQUAL to Catastrophic, "C", or "A' with Unit Division Code equal "S":		Unadjusted Loss Amount	Internal		S999999999	None	
Unadjusted Loss Amount = SUM (Field Market Value A) by Unit - SUM (Field Market Value B) by Unit		Field Market Value A	P22	24	999999999	None	Sum of all Field Market Value A for the Unit
		Field Market Value B	P22	25	999999999	None	Sum of all Field Market Value B for the Unit
Adjusted Loss Amount	= **When Over Under Reporting Factor Code EQUAL "U":** Unadjusted Loss Amount * Sum (Over Under Reporting Factor) by unit	Unadjusted Loss Amount (summed)	Internal		S999999999	None	Summed for Unit.
	When Over Under Reporting Factor Code EQUAL "O":	Adjusted Loss Amount	P22	43	S999999999	Round to whole number	
	= Unadjusted Loss Amount * (1 - Over Under Reporting Factor)	Over Under Reporting Factor	P22	23	9.999	None	Sum of all Under Reporting Factor for the Unit

Exhibit Name: Indemnity Calculation						
Exhibit Number: P22-2, Plan 50			**Reinsurance Year:** 2011			
Record Name: Inventory Value Claim			**Version:** DRAFT			
Record Code: P22			**Release Date:** 3/10/2011			

Insurance Plan Code	50 Dollar Amount of Insurance
Commodity Code	0073 Nursery

Calculations		Field Name	Record Number	Field Number	Field Format	Field Rounding	Rules
Section 2: Indemnity Calculation							
Unadjusted Indemnity Amount	= Adjusted Loss Amount - Occurrence Deductible Amount	Unadjusted Indemnity Amount	P22	44	S999999999	Round to whole number	
		Occurrence Deductible Amount	P22	28	999999999	None	
Preliminary Indemnity Amount	**The lesser of:**	Preliminary Indemnity Amount	P22	45	S9999999999	None	
	XPS Effective Insurance Amount **Or** Unadjusted Indemnity Amount	XPS Effective Insurance Amount	P22	22	9999999999	None	
Indemnity Amount =	Preliminary Indemnity Amount * Insured Share Percent * Price Election Factor	Indemnity Amount	P22	40	S9999999999	Round to whole number	
		Insured Share Percent	P22	29	9.999	None	
		Price Election Percent	P14	35	9.9999	None	
Rehabilitation Payment							
Section 3 Rehabilitation Payment Calculation							
When Insurance Option Code List contains Rehabilitation Payment, "RH":							
~~The Lesser of:~~	**The Lesser of:**	Indemnity Amount	P22	40	S9999999999	Round to whole number	
~~Actual Rehabilitation Cost~~		~~Actual Rehabilitation Cost~~	~~Internal~~		S9999999999	~~Round to whole number~~	
Indemnity Amount	= Actual Rehab Amount * ~~Over~~ Under Reporting Factor	Actual Rehab Amount	P22	39	9999999999		
		~~Over~~ Under Reporting Factor	P22	23	9.999	None	
~~Or~~	**Or**	~~Indemnity Amount~~	~~P22~~	~~40~~	~~S9999999999~~	~~Round to whole number~~	
	(Rehabilitation Plant Amount * .075) * ~~Over~~ Under Reporting Factor * Coverage Level Percent * Insured Share Percent	Rehabilitation Plant Amount	P22	36	9999999999	None	
~~Indemnity Amount =~~		~~Under Reporting Factor~~	~~P22~~	~~33~~	~~9.999~~	~~None~~	
		Coverage Level Percent	P14	34	9.9999	None	
		Insured Share Percent	P22	29	9.999	None	
~~When Insurance Option Code List DOES NOT contain Rehabilitation Payment, "RH":~~		~~Indemnity Amount~~	~~P22~~	~~40~~	~~S9999999999~~	~~Round to whole number~~	
~~Indemnity Amount =~~	~~Preliminary Indemnity Amount * Insured Share Percent * Price Election Factor~~	~~Insured Share Percent~~	~~P22~~	~~39~~	~~9.999~~	~~None~~	
		~~Price Election Percent~~	~~P14~~	~~34~~	~~9.9999~~	~~None~~	